

Transform Medicaid by fostering increased state flexibility and innovation, promoting greater accountability for outcomes, and ensuring stronger program integrity for taxpayers.

- CMS has delivered on our promise to provide states with greater flexibility to serve their residents and to promote stronger accountability for outcomes and program integrity for public dollars.
- CMS has supported state requests to test community engagement requirements that are intended to empower beneficiaries to rise out of poverty; has offered a more flexible, streamlined approach for approving substance use disorder (SUD) demonstrations in response to the opioid crisis; and has proposed changes to restore balance to the state-federal partnership.
- CMS will build on our efforts to strengthen accountability through improvements to the Scorecard and data transparency, while updating regulations to promote fiscal integrity.
- In 2019, CMS will continue efforts to give states even greater flexibility to unleash innovation in their Medicaid programs as the states move toward more accountable, value-based payment delivery systems.

Our actions have delivered results

- CMS has restored balance to the state and federal partnership.
 - CMS indicated through guidance that it expects to support state proposals to incentivize work and community engagement among non-elderly, non-pregnant adults who are not eligible for Medicaid on the basis of disability.
 - Recognizing the urgency of the opioid crisis, CMS has offered a more flexible, streamlined approach for states to seek to expand coverage of substance use disorder, including opioid use disorder, treatment services.
 - CMS created and published the first ever CMS Medicaid and CHIP Scorecard to bring greater transparency and accountability to program outcomes.
 - CMS has achieved significant improvement in processing times for Medicaid SPAs and 1915 waivers.
- CMS has focused on improving the integrity of how hundreds of billions in public dollars are spent.
 - CMS released its first-ever comprehensive Medicaid program integrity strategy, launching additional audits, data analytics efforts, and other activities to follow up on vulnerabilities identified by oversight entities.
 - CMS has taken steps to improve the integrity of federal financial oversight of state spending by issuing \$759 million in disallowances in 2018 to begin recovery of improperly claimed federal funding.

- CMS recovered \$9.7 billion in rate adjustments for the 2014-2016 period from the State of California. CMS also anticipates recovering \$2.5 billion from other states over this same time period.